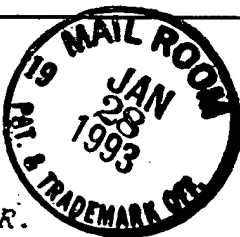


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1. CORRESPONDENCE ADDRESS

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2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

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SERIES CODE/SERIAL NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

07/753,907

09/03/91

011

ROSE, S

1205

11/27/92

Applicant
Applicant

PALMER

JAMES B. D.

TITLE OF
INVENTION

MEDICAMENTS

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

REF/CO221

514-171.000

132

UTILITY

NO

\$1170.00

03/01/93

3. Further correspondence to be mailed to the following:

Richard E. Fichter
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(1) NAME OF ASSIGNEE:

GLAXO GROUP LIMITED

(2) ADDRESS: (City & State or Country)

London, England

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

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Richard E. Fichter, Reg. No. 26,382

(Date)

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